

DDS Autism Spectrum Disorder Advisory Council Retreat (ASDAC)
Minutes
October 21, 2015

Members Present: Commissioner Murray, Deputy Commissioner Jordan Scheff, Representative Cathy Abercrombie, Sara Reed, Carol Ryan-Hanlon, Yana Razumnaya, Zachary Laudano, Marcia Eckerd, Jim Loomis, Lois Rosenwald, Lynn Ricci, John Molteni, Ruth Eren, Judy Dowd, Isabelina Rodriguez, Kathy Marchione, Ann Gionet, Beth Leslie, Doriana Vicedomini, William Halsey, Sara Lourie, and Nikki Richer

Others Present: Jane Thierfeld-Brown, Debra Anderson, Shelly Maynes, Katie Rock-Burns, Lisa Bonetti

Call to Order: 9:39

Welcome and Introductions:

Commissioner Murray offered an apology to members about the lack of communication with the Council over the past few months indicating that it was not her intent to keep information from anyone. She encouraged everyone to call or email her directly if they had any questions and expressed the importance of the Council to the department and her renewed commitment to making the ASD division stronger and more efficient. Members can email Commissioner Murray at: morna.murray@ct.gov

Commissioner Murray reviewed the purpose of retreat as it had been discussed at the April Council meeting – to refocus the Council and set goals for the next two years.

A question was asked about whether there was going to be a new director appointed for the Autism Division. Concern was expressed that the Council had not been informed that the director would be out for an extended time and about rumors for what would happen in the aftermath of her resignation. Several members asked if there was a bigger plan in place. ASRC and their Director reported that they have received many calls of concern from families.

Commissioner Murray stated she hadn't shared anything about the former director's extended leave because she couldn't violate medical privacy and stated that Deb Anderson is the interim point person. The Commissioner added that there have been discussions about the status of the director position but that she was uncertain about refilling it given the discussions regarding department organization changes. The Commissioner also said that the Department wants to expand upon the work of the division and make the work more efficient. She indicated that providers, advocates and consumers have expressed frustration about feeling like the division

is not part of DDS and that they feel like “second class citizens.” She said she will be mindful of those sentiments with any restructuring plans. She reported that one idea she had was to get case managers out into the regions but that she would be happy to take advice from Council on any other ideas. She reiterated that the Council will be the first to know once decisions are made.

Discussion ensued about why the Council was structured the way it has been and concerns that any decentralizing be mindful that staff working with the population be trained and understand the unique challenges in working with individuals with ASD.

Commissioner Murray assured the Council that there is leadership in the division but that the point was well taken. That DDS is ensuring that individuals with ASD are getting the appropriate services and that they are looking at a flatter organizational model in order to structure the agency more effectively.

There was some concern expressed about whether ID and autism are separate but not equal. There were concerns about housing availability, etc and supports needed to help individuals succeed with moving out. The Commissioner said there were some very good housing options becoming available and that she would share them at the next meeting. She reported that there are 50 slots for supportive housing which are not in place at the moment but in the works and that there were 200 new units of housing opening within two years.

The minutes were approved.

Updates were provided on the Feasibility Study Projects.

- In-Patient Specialized ASD Beds – A contract is in place with the Hospital for Special Care to support an 8-bed unit. They hope to admit patients in late fall. The start-up funding will support program development, consultation, training and milieu development.
- In-home Behavioral Support project – School to home teams have been awarded to two LEAs (Region 17 and Suffield) to work with 5 adolescents each. The work is ongoing until August of 2016. The LEA's will update the Council as the work progresses.
- Social/Recreational Activities – the RFP has gone out and responses have been reviewed. The winning organization will be notified soon.
- PRTF Multi-Disciplinary Teams – This project is back on track. Jordan has had successful conversations with a perspective contractor. Funding has been identified to support this initiative.

There was some discussion about the status of the funding to implement feasibility study initiatives. Commissioner Murray stated there are ongoing discussions around the Autism budget and that she would provide an update at the next meeting.

- UCONN – the University Center for Excellence in Developmental Disabilities has begun developing a professional curricula and materials for providers serving individuals with ASD and their families. A curriculum will be developed for medical professionals including pediatricians, psychologist and social workers.
- SCSU- Training for Educators Cohort #1- Training is ongoing. Four school districts were in the first cohort. Training took place from March 6, 2015 through April 21, 2015. Cohort # 2 consists of three school districts and will be completed by December, 2015.

A question was raised regarding a plan to promote the comprehensive resource guide. DDS stated that they would be happy to do that and would like suggestions from the Council on the most effective way to accomplish it. ASRC reported that they have a co-worker working hard on a marketing plan for the resource guide and will send DDS the link to the guide. There were several other potential organizations suggested that could also share the link such as the Office of Protection and Advocacy and the Department of Education.

An update was provided on the Early Childhood Waiver. There are 29 children on the waiver and an additional 26 on the waiting list. The Department reported that they are working on ensuring that all Husky A children are being referred to Value Options to receive services under the new Medicaid program.

A report was provided on the new Medicaid mandate to cover autism. To date, DDS has qualified 26 providers and another 18 are in process. Value Options has 34 credentialed providers. Value Options has taken 1,543 calls from members and 292 calls from providers inquiring about the program. There was some concern that these numbers seemed low and it was suggested that this could be remedied through more marketing and several suggestions were offered about where this could occur.

It was brought to the Council's attention that providers feel the Medicaid rates are not high enough. It was also stated that the process to become a qualified provider is complicated but that it is important that the Council support publically and do what they can to increase provider enrollment. DSS suggested that that one of the reasons providers have not enrolled yet is that they want to see the state regulations first as DSS has been getting calls from clinics and health centers all the time asking if the regulations are out yet. DSS reported that they have been working to make rates competitive and would ask any provider in the room to look at them and enroll. DSS is also working to add additional service categories such as direct

observation/direction, evidence-based group and billing for program books. To date, CMS has had no issues with adding these new services.

There were questions about eligibility criteria for participation in the Husky A program. And some discussion about the desire that commercial insurance provide similar coverage as Husky.

There was a question regarding the status of credentialing psychologists. It was explained that every provider needs to go through a qualifying process through DDS. DDS believes facility and clinics are required to qualify. Commissioner Murray thanked DDS and OPM for working with DDS on the qualifying regulations.

Another concern was expressed that ASD services are a unique service under the Medicaid umbrella. DDS assured that Value Options is working to get to know who the providers are and understand the unique needs. Clinical Teams have been more involved in reviewing paperwork from providers, auditing and looking at charts.

There was a question about whether, with the new autism mandate, the Early Childhood waiver needed to be amended or whether it is a State Plan service. Commissioner Murray said that before the mandate took place the waiver would accept children both Husky A and B eligible. There are currently 6 Husky B out of 29 children on the waiver. There were discussions about what happens when Husky B children age off the waivers because autism services are not covered under Husky B.

DDS reported that there are 101 individuals on the lifespan waiver ranging in age from 5 and up. There are 33 kids under the age of 21. 68 individuals are over 21. The ASD division is working with their fiscal office to determine whether additional individuals can be served to move individuals off of the waiting list. There were questions about whether individuals have been dropped from the waiver but the slots not refilled. Commissioner Murray stated that there are capacity building and outreach issues and that perhaps the Council could assist with this. There were also questions about whether individuals from DCF are still transitioning. The representative from DCF stated that the Voluntary Services program is for mental health and substance abuse; however some have been taken in to DDS with exceptions. Commissioner Murray stated that DDS primarily serves adults but serves children with ID and/or autism spectrum disorder under behavioral services program. She cautioned that when children are school age, they need to ensure schools are providing the services they are supposed to. Commissioner Murray encouraged members to send additional questions on the waivers to Deb Anderson.

There was some discussion about the scope of the Council and what recommendations should be considered by the Council. Rep. Abercrombie explained that the Council has a broad responsibility so that no idea could not be considered. Commissioner Murray questioned making recommendations that impact populations served by commercial insurance because that isn't the direct

purview of the Council. The Commissioner emphasized that she wants to ensure that Council can be as effective as possible and suggested that DDS would like to focus on the things that need to be addressed immediately and individuals currently being served.

Rep. Abercrombie offered legislative help wherever necessary.

The facilitator helped the group to develop the following list of goals. The plan was to distribute the list and have the group prioritize them.

Short Term Goals:

- Provider identification and training
- Education
- Services that exist
- Communication about transition
- Follow-up on Pilots/Measurement of Outcome
- Coordination of information
- Utilization of council expertise
- Housing/Community

Long Term Goals:

- Building Capacity
- Autism Pride Day
- Pre-Service programs
- Training of Individuals with ASD
- Coordination of information
- Overlap with Department of Education
- Utilizing council expertise
- Ongoing Training

The meeting was adjourned at 12pm.

Next meeting is December 16, 2015 @9:30 at LOB room 2A